| Fill | in this information to identify your case | e: | | | |
|--------|--|-------------------------|---|--------------|------------------------|
| | otor 1 Alexandra Kelley | • | | | |
| | First Name | Middle Name | Last Name | | |
| | vtor 2 use if, filing) First Name | Middle Name | Last Name | | |
| Uni | red States Bankruptcy Court for the: E | ASTERN DISTRICT C | DF MISSOURI | | |
| Cas | e number 17-11034 | | | | |
| (if kn | 17 11001 | | | ☐ Check | c if this is an |
| | | | | amen | ded filing |
| | | | | | |
| | ficial Form 106Sum | | | | |
| | | | nd Certain Statistical Information e are filing together, both are equally responsible for | | 12/15 |
| | original forms, you must fill out a new | | he information on this form. If you are filing amend k the box at the top of this page. | Your a | ssets |
| | | | | Value | of what you own |
| 1. | Schedule A/B: Property (Official Form 1a. Copy line 55, Total real estate, from | 106A/B) Schedule A/B | | \$ | 125,000.00 |
| | 1b. Copy line 62, Total personal property | y, from Schedule A/B. | | \$ | 8,888.00 |
| | 1c. Copy line 63, Total of all property on | Schedule A/B | | \$ | 133,888.00 |
| Par | 2: Summarize Your Liabilities | | | | |
| | | | | | abilities t you owe |
| 2. | Schedule D: Creditors Who Have Claim: 2a. Copy the total you listed in Column A | | / (Official Form 106D) the bottom of the last page of Part 1 of Schedule D | \$ | 82,229.00 |
| 3. | Schedule E/F: Creditors Who Have Uns | ecured Claims (Officia | . 0 | \$ | 0.00 |
| | | | | · — | |
| | 3b. Copy the total claims from Part 2 (no | onpriority unsecured o | claims) from line 6j of Schedule E/F | \$ | 0.00 |
| | | | Your total liabilities | \$ | 82,229.00 |
| Par | 3: Summarize Your Income and Exp | oenses | | | |
| 4. | Schedule I: Your Income (Official Form 1 | | | | |
| т. | ` | , | ə I | \$ | 2,189.00 |
| 5. | Schedule J: Your Expenses (Official For Copy your monthly expenses from line 2 | , | | \$ | 2,360.00 |
| Par | 4: Answer These Questions for Adr | ninistrative and Stat | istical Records | | |
| 6. | Are you filing for bankruptcy under C | hanters 7, 11, or 132 | , | | |
| U. | | • • • | Check this box and submit this form to the court with yo | ur other scl | nedules. |
| | Yes | | | | |
| 7. | What kind of debt do you have? | | | | |
| | | | debts are those "incurred by an individual primarily for og for statistical purposes. 28 U.S.C. § 159. | a personal | , family, or |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$ 1,552.17

O. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total claim | |
|--|-------------|------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

| Fill i | n this infor | mation to identify your o | case and this | filing | j : | | | |
|----------------|--|-----------------------------|---------------|--------|---|--|-----------------------------|--|
| Debt | tor 1 | Alexandra Kelley | | | | | | |
| | | First Name | Middle Na | ame | Last Name | | | |
| Debt (Spous | tor 2 se, if filing) | First Name | Middle Na | ame | Last Name | | | |
| Unite | ed States Ba | ankruptcy Court for the: | EASTERN DIS | STRI | CT OF MISSOURI | | | |
| Case | e number | 17-11034 | | | | | | ☐ Check if this is an |
| | | | | | | | | amended filing |
| Off | icial Fo | orm 106A/B | | | | | | |
| Sc | hedul | le A/B: Prope | erty | | | | | 12/15 |
| | you own or l | have any legal or equitable | | | Estate You Own or Have an Interest In lence, building, land, or similar property? | | | |
| 1.1 | RR # 2 Box 4805 Street address, if available, or other description | | | What | s is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative | the amount | of any secure | aims or exemptions. Put d claims on <i>Schedule D:</i> ms Secured by Property. |
| | Ellsinore | MO 6393 | 37-0000 | | Manufactured or mobile home Land | Current val | | Current value of the portion you own? |
| - | City | State Z | ZIP Code | | Investment property Timeshare Other | \$12 Describe th (such as fe | 25,000.00 he nature of y | \$125,000.00 rour ownership interest ancy by the entireties, or |
| | | | , | | has an interest in the property? Check one Debtor 1 only | a life estate), if known. Tenancy by the Entireties | | |
| | Carter | | | | | | ~, | |
| - | County | | | | Debtor 1 and Debtor 2 only | ☐ Check | r if this is com | nmunity property |
| | | | | | At least one of the debtors and another | (see ins | structions) | mumy property |
| | | | | | r information you wish to add about this iter erty identification number: | m, such as lo | cal | |
| | | | | 2 So | Acres of Land ources of Live Water Appraised Value | | | |
| | | | | | your entries from Part 1, including any | | | \$125,000.00 |

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Part 2: Describe Your Vehicles

| Deb 3. С а | _ | trucks, tractors, sport utility ve | | se number (ir known) <u>1</u> | 7-11034 |
|----------------------|-----------|--|---|--|--|
| | No | | | | |
| _ | Yes | | | | |
| | | | | | |
| 3.1 | Make: | Volkswagon | Who has an interest in the property? Check one | | d claims or exemptions. Put |
| 0 | Model: | | ■ Debtor 1 only | | cured claims on Schedule D: Claims Secured by Property. |
| | Year: | 2002 | ☐ Debtor 2 only | | |
| | | nate mileage: 250000 | Debtor 1 and Debtor 2 only | Current value of the entire property? | Current value of the portion you own? |
| | | ormation: | ☐ At least one of the debtors and another | | , , |
| | | | | | |
| | | | ☐ Check if this is community property (see instructions) | \$1,675.0 | 9 \$1,675.00 |
| 3.2 | Make: | Chevy | Who has an interest in the property? Check one | | d claims or exemptions. Put |
| 0.2 | Model: | Silverado | Debtor 1 only | | cured claims on Schedule D: Claims Secured by Property. |
| | Year: | 2003 | Debtor 2 only | | |
| | | nate mileage: 187885 | Debtor 1 and Debtor 2 only | Current value of the entire property? | Current value of the portion you own? |
| | | ormation: | At least one of the debtors and another | | |
| | | needed to Sensor | — At least tire of the debtors and another | | |
| | | | ☐ Check if this is community property | <i>\$5,425.0</i> | 0 \$5,425.00 |
| | No Yes | | | | |
| | | | n for all of your entries from Part 2, including an that number here | | \$7,100.00 |
| Part | 3: Descri | be Your Personal and Household Ite | ems | | |
| Do y | ou own c | or have any legal or equitable int | terest in any of the following items? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| E | | goods and furnishings Major appliances, furniture, linens, | , china, kitchenware | | |
| | . 163. DE | JOHDO | | | |
| | | Washer, Dryer, Chairs, books, I | 2 Bedroom Sets, Kitchenware, Kitchen Tab Pictures | le and | \$350.00 |
| | | Televisions and radios; audio, vide including cell phones, cameras, m scribe | eo, stereo, and digital equipment; computers, printer ledia players, games | rs, scanners; music colle | |
| | | Laptop | | | \$200.00 |
| | | | | | |

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

■ No

| D | ebtor 1 | Alexandra Kelley | Case number (if known) | 17-11034 |
|----|----------------------------------|--|--|---|
| | ☐ Yes. | Describe | | |
| 9. | | ent for sports and hobbies es: Sports, photographic, exercise, and other hobby equipment; bicy musical instruments | ycles, pool tables, golf clubs, skis; canoes a | and kayaks; carpentry tools; |
| | _ | Describe | | |
| 10 | . Firearn <i>Examp</i> | ns oles: Pistols, rifles, shotguns, ammunition, and related equipment | | |
| | ■ No □ Yes. | Describe | | |
| 1 | . Clothe: Examp □ No | s oles: Everyday clothes, furs, leather coats, designer wear, shoes, ac | cessories | |
| | ■ Yes. | Describe Used Clothing | | \$200.00 |
| | | Usea Ciotning | | φ200.00 |
| 2 | □ No Î | y bles: Everyday jewelry, costume jewelry, engagement rings, wedding Describe | g rings, heirloom jewelry, watches, gems, g | old, silver |
| | | Wedding Ring | | \$100.00 |
| 14 | ■ No □ Yes. Any otl | Describe her personal and household items you did not already list, includive specific information | uding any health aids you did not list | |
| 15 | | he dollar value of all of your entries from Part 3, including any art 3. Write that number here | | \$850.00 |
| | | scribe Your Financial Assets | | |
| D | o you ow | vn or have any legal or equitable interest in any of the following | J? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 16 | . Cash Examp □ No | oles: Money you have in your wallet, in your home, in a safe deposit | box, and on hand when you file your petition | on |
| | Yes | | | 4 |
| | | | Cash | \$100.00 |
| 17 | Examp | its of money bles: Checking, savings, or other financial accounts; certificates of d institutions. If you have multiple accounts with the same institu | | nouses, and other similar |
| | □ No ■ Yes | Institution nam | ne: | |

| D | btor 1 Alexandra Kelley | | Case number (if known) 17- | ·11034 |
|-----|---|--|---|-------------------------|
| | | | | |
| | 17.1. | Checking | US Bank 8275 | \$250.00 |
| | 17.2. | Checking | First Midwest Bank 9459 | \$250.00 |
| | 17.3. | Savings | First Midwest Bank 2016 | \$200.00 |
| | 17.4. | Savings | First Midwest Bank 0363 Custodial Account | \$138.00 |
| 18. | Bonds, mutual funds, or publi Examples: Bond funds, investm No Yes | | okerage firms, money market accounts name: | |
| 19. | Non-publicly traded stock and joint venture No | | orated and unincorporated businesses, including an interest in a | n LLC, partnership, and |
| | ☐ Yes. Give specific information Na | n about them ame of entity: | % of ownership: | |
| 20. | Negotiable instruments include Non-negotiable instruments are ■ No □ Yes. Give specific information | personal checks, cas those you cannot tra | otiable and non-negotiable instruments shiers' checks, promissory notes, and money orders. ansfer to someone by signing or delivering them. | |
| 21. | ■ No □ Yes. List each account separa | ISA, Keogh, 401(k), 4 | 103(b), thrift savings accounts, or other pension or profit-sharing plans | : |
| 22 | Security deposits and prepay | of account: | Institution name: | |
| 22. | Your share of all unused depos | its you have made so | that you may continue service or use from a company public utilities (electric, gas, water), telecommunications companies, o | or others |
| | ☐ Yes | | Institution name or individual: | |
| 23. | No | . , | ey to you, either for life or for a number of years) | |
| | Yes Issuer nar | ne and description. | | |
| 24. | Interests in an education IRA, 26 U.S.C. §§ 530(b)(1), 529A(b), ■ No | | ualified ABLE program, or under a qualified state tuition progran | 1. |
| | · · · | name and description | n. Separately file the records of any interests.11 U.S.C. § 521(c): | |
| 25. | | erests in property (o | ther than anything listed in line 1), and rights or powers exercisa | able for your benefit |
| | ■ No □ Yes. Give specific information | n about them | | |
| 26. | Patents, copyrights, trademar Examples: Internet domain nam No | | nd other intellectual property ads from royalties and licensing agreements | |

 $\hfill \square$ Yes. Give specific information about them...

| D | ebtor 1 | Alexandra Kelley | Case number (if known) | 17-11034 |
|----|--------------|--|---|---|
| 27 | Exam ■ No | ses, franchises, and other general intangibles nples: Building permits, exclusive licenses, cooperative association holdings, . Give specific information about them | liquor licenses, professional license | S |
| M | loney or | r property owed to you? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28 | ■ No | efunds owed to you . Give specific information about them, including whether you already filed th | e returns and the tax years | |
| 29 | Exam | y support nples: Past due or lump sum alimony, spousal support, child support, mainter Give specific information | nance, divorce settlement, property s | settlement |
| 30 | Exam | amounts someone owes you nples: Unpaid wages, disability insurance payments, disability benefits, sick p benefits; unpaid loans you made to someone else Give specific information | ay, vacation pay, workers' compens | sation, Social Security |
| 31 | Exam | ests in insurance policies apples: Health, disability, or life insurance; health savings account (HSA); cred b. Name the insurance company of each policy and list its value. Company name: | it, homeowner's, or renter's insurance Beneficiary: | ce Surrender or refund value: |
| 32 | If you some | nterest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurance poene has died. Give specific information | licy, or are currently entitled to recei | ve property because |
| 33 | Exam | as against third parties, whether or not you have filed a lawsuit or made apples: Accidents, employment disputes, insurance claims, or rights to sue a Describe each claim | a demand for payment | |
| 34 | ■ No | contingent and unliquidated claims of every nature, including countered. Describe each claim | claims of the debtor and rights to | set off claims |
| 35 | ■ No | inancial assets you did not already list Give specific information | | |
| 36 | | the dollar value of all of your entries from Part 4, including any entries Part 4. Write that number here | | \$938.00 |
| Pa | art 5: D | escribe Any Business-Related Property You Own or Have an Interest In. List any | real estate in Part 1. | |
| | ■ No. G | own or have any legal or equitable interest in any business-related property? So to Part 6. Go to line 38. | | |

| Deb | otor 1 | Alexandra Kelley | | Case number (if known) | 17-11034 |
|------|--------|--|------------------------|---------------------------|------------------------|
| Part | | scribe Any Farm- and Commercial Fishing-Related Property You you own or have an interest in farmland, list it in Part 1. | Own or Have an Interes | t In. | |
| 46. | Do yοι | u own or have any legal or equitable interest in any farm- | or commercial fishin | g-related property? | |
| | ■ No. | Go to Part 7. | | | |
| | ☐ Yes | s. Go to line 47. | | | |
| Part | 7: | Describe All Property You Own or Have an Interest in That You | Did Not List Above | | |
| 53. | | u have other property of any kind you did not already list? bles: Season tickets, country club membership | | | |
| | ■ No | • | | | |
| | ☐ Yes. | Give specific information | | | |
| 54. | | the dollar value of all of your entries from Part 7. Write tha | at number here | | \$0.00 |
| 55. | Part ' | 1: Total real estate, line 2 | | | \$125,000.00 |
| 56. | Part 2 | 2: Total vehicles, line 5 | \$7,100.00 | | <u> </u> |
| 57. | Part : | 3: Total personal and household items, line 15 | \$850.00 | | |
| 58. | Part 4 | 4: Total financial assets, line 36 | \$938.00 | | |
| 59. | Part : | 5: Total business-related property, line 45 | \$0.00 | | |
| 60. | Part (| 6: Total farm- and fishing-related property, line 52 | \$0.00 | | |
| 61. | Part 7 | 7: Total other property not listed, line 54 + | \$0.00 | | |
| 62. | Total | personal property. Add lines 56 through 61 | \$8,888.00 | Copy personal property to | stal \$8,888.00 |
| 63. | Total | of all property on Schedule A/B. Add line 55 + line 62 | | | \$133,888.00 |

| Fill in this inform | mation to identify your | case: | | |
|---|-------------------------|--------------------|------------|------------------------------------|
| Debtor 1 | Alexandra Kelley | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | EASTERN DISTRICT O | F MISSOURI | |
| Case number | 17-11034 | | | |
| (if known) | | | | Check if this is an amended filing |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| | uppcum.c ciuiuici y ucu | | | | | | | | | |
|----|--|--------------------------------------|---------|---|------------------------------------|--|--|--|--|--|
| Pa | rt 1: Identify the Property You Claim as E | xempt | | | | | | | | |
| 1. | Which set of exemptions are you claiming | ? Check one only, eve | n if yo | our spouse is filing with you. | | | | | | |
| | ■ You are claiming state and federal nonban | kruptcy exemptions. | 11 U.S | S.C. § 522(b)(3) | | | | | | |
| | ☐ You are claiming federal exemptions. 11 to | J.S.C. § 522(b)(2) | | | | | | | | |
| 2. | For any property you list on Schedule A/B that you claim as exempt, fill in the information below. | | | | | | | | | |
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amo | ount of the exemption you claim | Specific laws that allow exemption | | | | | |
| | | Copy the value from Schedule A/B | Che | | | | | | | |
| | RR # 2 Box 4805 Ellsinore, MO 63937 Carter County | \$125,000.00 | | \$15,000.00 | RSMo § 513.475(1) | | | | | |
| | 78 Acres of Land 2 Sources of Live Water Tax Appraised Value Line from Schedule A/B: 1.1 | | | 100% of fair market value, up to any applicable statutory limit | | | | | | |
| | 2002 Volkswagon Jetta 250000 miles Line from Schedule A/B: 3.1 | \$1,675.00 | | \$1,675.00 | RSMo § 513.430.1(5) | | | | | |
| | Line Holli Schedule AVB. 3.1 | | | 100% of fair market value, up to any applicable statutory limit | | | | | | |
| | 2003 Chevy Silverado 187885 miles Repair needed to Sensor | \$5,425.00 | | \$1,325.00 | RSMo § 513.430.1(5) | | | | | |
| | Line from Schedule A/B: 3.2 | | | 100% of fair market value, up to any applicable statutory limit | | | | | | |
| | Washer, Dryer, 2 Bedroom Sets, Kitchenware, Kitchen Table and | \$350.00 | | \$350.00 | RSMo § 513.430.1(1) | | | | | |
| | Chairs, books, Pictures Line from Schedule A/B: 6.1 | | | 100% of fair market value, up to any applicable statutory limit | | | | | | |
| | Laptop Line from Schedule A/B: 7.1 | \$200.00 | | \$200.00 | RSMo § 513.430.1(1) | | | | | |
| | LITE ITOTTI SCREAUTE A/B: 1.1 | | | 100% of fair market value, up to any applicable statutory limit | | | | | | |

| Alexandra Kelley | | | Case number (if known) | 17-11034 | |
|--|---|--|--|---|--|
| Brief description of the property and line on Schedule A/B that lists this property Current value of the portion you own | | | ount of the exemption you claim | Specific laws that allow exemption | |
| | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | | |
| ed Clothing e from Schedule A/B: 11.1 | \$200.00 | • | \$200.00 | RSMo § 513.430.1(1) | |
| | | | 100% of fair market value, up to any applicable statutory limit | | |
| edding Ring | \$100.00 | | \$100.00 | RSMo § 513.430.1(2) | |
| SHOIL SCHEUULE A.B. 12.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| sh ofram Schodulo A/P: 16.1 | \$100.00 | | \$100.00 | RSMo § 513.430.1(3) | |
| e nom <i>Schedule A/B.</i> 10.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| ecking: US Bank 8275 | \$250.00 | | \$150.00 | RSMo § 513.430.1(3) | |
| e nom <i>schedule A/B. 11.1</i> | | | 100% of fair market value, up to any applicable statutory limit | | |
| ecking: First Midwest Bank 9459 | \$250.00 | | \$150.00 | RSMo § 513.430.1(3) | |
| TIOIII Schedule A/B. 11.2 | | | 100% of fair market value, up to any applicable statutory limit | | |
| vings: First Midwest Bank 2016 | \$200.00 | | \$200.00 | RSMo § 513.430.1(3) | |
| . Holli Galledale A.E. 11.6 | | | 100% of fair market value, up to any applicable statutory limit | | |
| bject to adjustment on 4/01/19 and every No | 3 years after that for ca | ases fi | · | , | |
| | ed Clothing e from Schedule A/B: 11.1 edding Ring e from Schedule A/B: 12.1 sh e from Schedule A/B: 16.1 ecking: US Bank 8275 e from Schedule A/B: 17.1 ecking: First Midwest Bank 9459 e from Schedule A/B: 17.2 vings: First Midwest Bank 2016 e from Schedule A/B: 17.3 evyou claiming a homestead exemption bject to adjustment on 4/01/19 and every No | of description of the property and line on redule A/B that lists this property Current value of the portion you own Copy the value from Schedule A/B Copy the value from Sched | In description of the property and line on pedule A/B that lists this property In dedule A/B that lists that lists that lists that lists that lists that lists that l | Amount of the exemption you claim contectule A/B that lists this property Copy the value from Schedule A/B: 11.1 ### \$200.00 \$200.00 \$200.0 | |

| Fill in this information to identify you | ur case: | | | | |
|--|--|---------------|---|--|----------------------|
| Debtor 1 Alexandra Kelle First Name | Middle Name Last Na | ame | | | |
| Debtor 2 | Middle Name East No | anio | | | |
| (Spouse if, filing) First Name | Middle Name Last Na | ame | | | |
| United States Bankruptcy Court for the | EASTERN DISTRICT OF MISSOURI | | | | |
| Case number 17-11034 | | | | | |
| (if known) | | | | ☐ Check | if this is an |
| | | | | ameno | ded filing |
| Official Form 106D | | | | | |
| | s Who Have Claims Secu | ured I | ov Propert | V | 12/15 |
| | If two married people are filing together, both | | | | tion If more space |
| | out, number the entries, and attach it to this fo | | | | |
| Do any creditors have claims secured b | y your property? | | | | |
| | his form to the court with your other schedu | ıles. You | have nothing else to | o report on this form. | |
| ■ Yes. Fill in all of the information | below. | | · · | · | |
| Part 1: List All Secured Claims | | | | | |
| | more than one secured claim, list the creditor sep | | Column A | Column B | Column C |
| for each claim. If more than one creditor has much as possible, list the claims in alphabet | s a particular claim, list the other creditors in Part : ical order according to the creditor's name. | 2. As | Amount of claim Do not deduct the | Value of collateral that supports this | Unsecured portion |
| 2.1 Bank of Grandin | Describe the property that secures the claim | m. | value of collateral. \$82,229.00 | claim \$125,000.00 | If any \$0.00 |
| Creditor's Name | RR # 2 Box 4805 Ellsinore, MO | <u></u> – | φο2,229.00 | \$125,000.00 | φυ.υυ |
| | 63937 Carter County | | | | |
| | 78 Acres of Land | | | | |
| 402 Eth Ctroot | 2 Sources of Live Water Tax Appraised Value | | | | |
| 403 5th Street PO Box 235 | As of the date you file, the claim is: Check all | that | | | |
| Grandin, MO 63943 | apply. Contingent | | | | |
| Number, Street, City, State & Zip Code | Unliquidated | | | | |
| Who owes the debt? Check one. | ☐ Disputed Nature of lien. Check all that apply. | | | | |
| Debtor 1 only | ☐ An agreement you made (such as mortgage | e or secure | d | | |
| Debtor 2 only | car loan) | | | | |
| Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, mechanic's l | lien) | | | |
| At least one of the debtors and another | ☐ Judgment lien from a lawsuit | Mortaco | 10 | | |
| ☐ Check if this claim relates to a community debt | Other (including a right to offset) | Mortgag | le | | |
| Date debt was incurred 7/2009 | Last 4 digits of account number 2 | 2502 | | | |
| | | | | | |
| | | | | | |
| Add the dollar value of your entries in C If this is the last page of your form, add | Column A on this page. Write that number here | 9 : | \$82,22 | | |
| Write that number here: | tino donal value totalo nom all pagoo. | | \$82,22 | 29.00 | |
| Part 2: List Others to Be Notified for | or a Debt That You Already Listed | | | | |
| trying to collect from you for a debt you o | pe notified about your bankruptcy for a debt the owe to someone else, list the creditor in Part 1, t you listed in Part 1, list the additional crediton nis page. | , and then | list the collection ag | gency here. Similarly, if | you have more |
| Name, Number, Street, City, State & | · | On which li | ne in Part 1 did you ei | nter the creditor? 2.1 | |
| Bank of Grandin Vice Pres | | l act / diait | s of account number | | |
| 106 Highway 142E Doniphan, MO 63935 | | Last + uigit | o or account number _ | _ | |

| Debt | Debtor 1 Alexandra Kelley | | | Case number (if know) 17-11034 |
|------|---|-------------|-----------|---|
| | First Name | Middle Name | Last Name | |
| | Name, Number, Street Bank of Grandor 403 5th Street PO Box 235 Doniphan, MO 63 | | | On which line in Part 1 did you enter the creditor? |
| | Name, Number, Street, Marilyn Hart, Suc The Kirby Law F 100 Jefferson St. Doniphan, MO 63 | irm | | On which line in Part 1 did you enter the creditor? |
| | Name, Number, Street, The Kirby Law Fo 100 Jefferson St. Doniphan, MO 63 | | | On which line in Part 1 did you enter the creditor? |

| Fill in this infor | mation to identify your | | | |
|---|-------------------------|--------------------|------------|--------------------------------------|
| Debtor 1 | Alexandra Kelley | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | EASTERN DISTRICT O | F MISSOURI | |
| Case number | 17-11034 | | | |
| (if known) | 17 11007 | | | ☐ Check if this is an amended filing |

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

- 1. Do any creditors have priority unsecured claims against you?
 - No. Go to Part 2.
 - ☐ Yes.

Part 2: List All of Your NONPRIORITY Unsecured Claims

- 3. Do any creditors have nonpriority unsecured claims against you?
 - No. You have nothing to report in this part. Submit this form to the court with your other schedules.
 - ☐ Yes.

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | Tot | al Claim |
|--------------------|-----|---|-----|-----|----------|
| | 6a. | Domestic support obligations | 6a. | \$ | 0.00 |
| Total | | | | | |
| claims from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ | 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ | 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ | 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ | 0.00 |
| | | | | Tot | al Claim |
| | 6f. | Student loans | 6f. | \$ | 0.00 |
| Total claims | | | | | |
| from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ | 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ | 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ | 0.00 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ | 0.00 |

-

| Fill in this infor | mation to identify your | case: | | |
|---------------------|--------------------------|--------------------|------------|--------------------------------------|
| Debtor 1 | Alexandra Kelley | | |] |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | EASTERN DISTRICT C | F MISSOURI | |
| Case number | 17-11034 | | | |
| (if known) | | | | ☐ Check if this is an amended filing |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 AT&T
PO Box 10330
Fort Wayne, IN 46851

State what the contract or lease is for
Phone Service

| | | | | | _ |
|------------------------------|--|-------------------------------|-------------------------|---------------------------------------|---|
| Fill in this | information to identify your | case: | | | |
| Debtor 1 | Alexandra Kelley | , | | | |
| Dahtar 0 | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, fili | ng) First Name | Middle Name | Last Name | | |
| United Sta | ates Bankruptcy Court for the: | EASTERN DISTRICT C | OF MISSOURI | | |
| Case num | her 17 11021 | | | | |
| (if known) | ber <u>17-11034</u> | | | | ☐ Check if this is an amended filing |
| Officia | l Form 106H | | | | |
| | lule H: Your Cod | obtore | | | 40/45 |
| Sched | iule ni Your Cou | eptors | | | 12/15 |
| our name | and case number (if known) | . Answer every question | l. | | op of any Additional Pages, write |
| = | | | | | |
| ■ No □ Yes | 3 | | | | |
| | | | | | |
| | hin the last 8 years, have you na, California, Idaho, Louisiana | | | | ty states and territories include) |
| = | 0 - (- 1' 0 | | | | |
| | . Go to line 3. s. Did your spouse, former spo | use, or legal equivalent live | e with you at the time? | | |
| | s. Dia your opouco, renner opo- | aco, or logar equivalent live | o war you at allo allo. | | |
| in line Form | e 2 again as a codebtor only i | f that person is a guaran | ntor or cosigner. Make | sure you have listed t | ng with you. List the person shown the creditor on Schedule D (Official , Schedule E/F, or Schedule G to fill |
| | Column 1: Your codebtor Name, Number, Street, City, State and Z | IP Code | | Column 2: The cr Check all schedul | editor to whom you owe the debt |
| | Hamo, Hambor, Otroot, Oily, Otato and 2 | Oddo | | Crieck all scriedu | ез шагарру. |
| 3.1 | N | | | Schedule D, lir | |
| | Name | | | ☐ Schedule E/F, | |
| _ | | | | Schedule G, lii | ne |
| | Number Street City | State | ZIP Code | | |
| | | | | | |
| 3.2 | | | | Schedule D, lir | ne |
| | Name | | | ☐ Schedule E/F, | |
| | | | | ☐ Schedule G, lii | ne |
| - | Number Street | State | ZID Cada | _ | |
| | City | State | ZIP Code | | |

| Fill | in this information to identify your ca | ase: | | | | 1 | | | |
|-------------|---|---|-----------------------|-------------|------|-----------------------|--------------------------|------------------------------------|----------|
| | otor 1 Alexandra K | | | | | | | | |
| | otor 2 ouse, if filing) | · | | | _ | | | | |
| Uni | ted States Bankruptcy Court for the | : EASTERN DISTRICT | OF MISSOURI | | _ | | | | |
| 1 | se number <u>17-11034</u> | | | | | | led filing nent showi | ng postpetition following date: | |
| 0 | fficial Form 106l | | | | | MM / DD/ | YYYY | | |
| S | chedule I: Your Inc | ome | | | | | | | 12/15 |
| spo atta | plying correct information. If you use. If you are separated and you ch a separate sheet to this form. **Table Describe Employment** | r spouse is not filing wi | th you, do not inclu | ide infor | mati | on about your sp | ouse. If m | nore space is | needed, |
| 1. | Fill in your employment information. | | Debtor 1 | | | Debtor | 2 or non- | filing spouse | |
| | If you have more than one job, attach a separate page with information about additional | Employment status ☐ Employed ☐ Not employed | | | | □ Emp | loyed employed | | |
| | employers. | Occupation | | | | Disab | led | | |
| | Include part-time, seasonal, or self-employed work. | Employer's name | | | | | | | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | | | | | | | |
| | | How long employed to | nere? | | | | | | |
| Pai | Give Details About Mor | nthly Income | | | | | | | |
| | mate monthly income as of the dause unless you are separated. | ate you file this form. If y | you have nothing to r | eport for | any | line, write \$0 in th | e space. Ir | nclude your nor | n-filing |
| - | ou or your non-filing spouse have mo e space, attach a separate sheet to | | embine the informatio | n for all e | empl | oyers for that pers | on on the | lines below. If | you need |
| | | | | | | For Debtor 1 | | ebtor 2 or ling spouse | |
| 2. | List monthly gross wages, sala deductions). If not paid monthly, | • | , , | 2. | \$ | 0.00 | \$ | 0.00 | |
| 3. | Estimate and list monthly overt | ime pay. | | 3. | +\$ | 0.00 | +\$ | 0.00 | |
| 4. | Calculate gross Income. Add lir | ne 2 + line 3. | | 4. | \$ | 0.00 | \$ | 0.00 | |

| Debt | or 1 | Alexandra Kelley | | _ | Case nu | mber (if known) | 17-110 |)34 | |
|------|--|---|--|-------------------|-------------------|--------------------------------------|----------------------|--|----------|
| | Com | Ulino 4 horo | | 4. | For Do | ebtor 1 | | ebtor 2 or lling spouse | |
| | Copy | / line 4 here | | 4. | Φ | 0.00 | Φ | 0.00 | |
| 5. | List | all payroll deductions: | | | | | | | |
| | 5a. | Tax, Medicare, and Social Securi | ity deductions | 5a. | \$ | 0.00 | \$ | 0.00 | |
| | 5b. | Mandatory contributions for retir | rement plans | 5b. | \$ | 0.00 | \$ | 0.00 | |
| | 5c. | Voluntary contributions for retire | ement plans | 5c. | \$ | 0.00 | \$ | 0.00 | |
| | 5d. | Required repayments of retirement | ent fund loans | 5d. | \$ | 0.00 | \$ | 0.00 | |
| | 5e. | Insurance | | 5e. | \$ | 0.00 | \$ | 0.00 | |
| | 5f. | Domestic support obligations | | 5f. | \$ | 0.00 | \$ | 0.00 | |
| | 5g. | Union dues | | 5g. | \$ | 0.00 | \$ | 0.00 | |
| | 5h. | Other deductions. Specify: | | 5h.+ | - \$ | 0.00 | + \$ | 0.00 | |
| 6. | Add | the payroll deductions. Add lines | 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | \$ | 0.00 | \$ | 0.00 | |
| 7. | Calc | ulate total monthly take-home pay | Subtract line 6 from line 4. | 7. | \$ | 0.00 | \$ | 0.00 | |
| | 8a. 8b. 8c. 8d. 8e. 8f. | regularly receive Include alimony, spousal support, of settlement, and property settlement Unemployment compensation Social Security Other government assistance the Include cash assistance and the value. | ty and business showing gross usiness expenses, and the total ou, a non-filing spouse, or a depender child support, maintenance, divorce t. at you regularly receive alue (if known) of any non-cash assistance to the supplemental of the supplemental of the supplemental or the supplemental or total or the supplemental or the s | 8c. 8d. 8e. | \$ \$ \$ \$ | 0.00 0.00 0.00 0.00 0.00 | \$\$ \$\$ \$\$ | 0.00 0.00 0.00 0.00 676.00 | |
| | og. | Tension of retirement moonie | Non Filing Spouse - Care for | og. | Ψ | 0.00 | Ψ | 0.00 | |
| | 8h. | Other monthly income. Specify: | Family Member | 8h.+ | - \$ | 0.00 | + \$ | 1,080.00 | |
| 9. | Add | all other income. Add lines 8a+8b- | +8c+8d+8e+8f+8g+8h. | 9. | \$ | 0.00 | \$ | 2,189.00 | |
| 10. | Calc | ulate monthly income. Add line 7 - | Fline 9. | 10. \$ | | 0.00 + \$ | 2 18 | 9.00 = \$ | 2,189.00 |
| | | the entries in line 10 for Debtor 1 and | | L | | | _,.0 | | |
| 11. | Inclu- other | de contributions from an unmarried p friends or relatives. ot include any amounts already inclu | the expenses that you list in Schedul partner, members of your household, you ded in lines 2-10 or amounts that are no | ur depen | | | | hedule J. 11. +\$ | 0.00 |
| 12. | | that amount on the Summary of Sci | ine 10 to the amount in line 11. The re hedules and Statistical Summary of Cert | | | | | 12. \$ | 2,189.00 |

13. Do you expect an increase or decrease within the year after you file this form?
■ No.
□ Yes. Explain:

Combined monthly income

| Fill | in this information to identify y | our case: | | | | | |
|-----------|--|---------------------------|---|--|--------------|-------------------|-------------------------------|
| Deb | tor 1 Alexandra I | Kelley | | | Che | ck if this is: | |
| Deb | tor 2 | | | | | An amended filing | wing postpetition chapter |
| | ouse, if filing) | | | | | 13 expenses as of | |
| Unit | ed States Bankruptcy Court for the | e: EASTE | RN DISTRICT OF MISSO | JRI | | MM / DD / YYYY | |
| Cas | e number 17-11034 | | | | | | |
| (If k | nown) | | | | | | |
| 0 | fficial Form 106J | | | | | | |
| | chedule J: Your | Exper | ises | | | | 12/15 |
| Be | as complete and accurate a prmation. If more space is no mber (if known). Answer eve | s possible eeded, atta | . If two married people ar ich another sheet to this | | | | or supplying correct |
| Par 1. | t 1: Describe Your Hous Is this a joint case? | ehold | | | | | |
| | No. Go to line 2. | • | ata kawasaka 140 | | | | |
| | ☐ Yes. Does Debtor 2 live ☐ No | ın a separ | ate nousenoid? | | | | |
| | <u> </u> | st file Offic | ial Form 106J-2, <i>Expenses</i> | for Separate House | ehold of Deb | otor 2. | |
| 2. | Do you have dependents? | □ No | | | | | |
| | Do not list Debtor 1 and Debtor 2. | ■ Yes. | Fill out this information for each dependent | Dependent's relat Debtor 1 or Debto | | Dependent's age | Does dependent live with you? |
| | Do not state the | | | | | | □ No |
| | dependents names. | | | Daughter | | 16 | Yes |
| | | | | | | | □ No □ Yes |
| | | | | | | | □ res |
| | | | | | | | ☐ Yes |
| | | | | | | | □ No |
| | | | | | | | ☐ Yes |
| 3. | Do your expenses include expenses of people other yourself and your depende | than | No Yes | | | | |
| | Estimate Your Ongo | | | | | | |
| exp | imate your expenses as of yenses as of yenses as of a date after the blicable date. | | | | | | |
| | lude expenses paid for with | | | | | | |
| | value of such assistance ar ficial Form 106I.) | nd have inc | cluded it on Schedule I: Y | our Income | | Your exp | enses |
| 4. | The rental or home owner payments and any rent for the | | - | nclude first mortgag | e 4. : | \$ | 750.00 |
| | If not included in line 4: | | | | | | |
| | 4a. Real estate taxes | | | | 4a. | \$ | 0.00 |
| | 4b. Property, homeowner | 's, or renter | 's insurance | | 4b. | · | 0.00 |
| | 4c. Home maintenance, r | | | | 4c. | \$ | 0.00 |
| | 4d. Homeowner's associa | | | | 4d. | · | 0.00 |
| 5. | Additional mortgage paym | ents for y | our residence, such as ho | me equity loans | 5. | \$ | 0.00 |

| Debtor 1 | Alexandra Kelley | Case num | ber (if known) | 17-11034 |
|--------------------|---|------------|----------------|----------------------------|
| 5. Utilitie | es: | | | |
| | Electricity, heat, natural gas | 6a. | \$ | 200.00 |
| | Water, sewer, garbage collection | 6b. | \$ | 0.00 |
| | Telephone, cell phone, Internet, satellite, and cable services | 6c. | \$ | 230.00 |
| | Other. Specify: | 6d. | \$ | 0.00 |
| | and housekeeping supplies | — 7. | \$ | 433.00 |
| | care and children's education costs | 8. | \$ | 50.00 |
| | ing, laundry, and dry cleaning | 9. | \$ | 0.00 |
| | nal care products and services | 10. | \$ | |
| | ral and dental expenses | | | 20.00 |
| | • | 11. | \$ | 10.00 |
| | portation. Include gas, maintenance, bus or train fare. t include car payments. | 12. | \$ | 175.00 |
| | tainment, clubs, recreation, newspapers, magazines, and books | 13. | · | 20.00 |
| | table contributions and religious donations | 14. | \$ | 0.00 |
| 5. Insur a | • | 14. | Φ | 0.00 |
| | t include insurance deducted from your pay or included in lines 4 or 20. | | | |
| | Life insurance | 15a. | \$ | 0.00 |
| | Health insurance | 15b. | · | 97.00 |
| | Vehicle insurance | 15b. | · | |
| | | | · - | 100.00 |
| | Other insurance. Specify: | 15d. | \$ | 0.00 |
| i. Taxes Specif | b. Do not include taxes deducted from your pay or included in lines 4 or 20. | 16. | \$ | 0.00 |
| | Iment or lease payments: | _ | · | 0.00 |
| 17a. | Car payments for Vehicle 1 | 17a. | \$ | 0.00 |
| 17b. | Car payments for Vehicle 2 | 17b. | \$ | 0.00 |
| | Other. Specify: | 17c. | \$ | 0.00 |
| | Other. Specify: | 17d. | \$ | 0.00 |
| | payments of alimony, maintenance, and support that you did not report as | | | |
| | cted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18. | \$ | 0.00 |
| | payments you make to support others who do not live with you. | | \$ | 0.00 |
| Specif | y: | 19. | | |
|). Other | real property expenses not included in lines 4 or 5 of this form or on School | dule I: Yo | our Income. | |
| 20a. | Mortgages on other property | 20a. | \$ | 275.00 |
| 20b. | Real estate taxes | 20b. | \$ | 0.00 |
| 20c. | Property, homeowner's, or renter's insurance | 20c. | \$ | 0.00 |
| 20d. | Maintenance, repair, and upkeep expenses | 20d. | \$ | 0.00 |
| | Homeowner's association or condominium dues | 20e. | · | 0.00 |
| | : Specify: | 21. | · - | 0.00 |
| . Guiei | . opcony | | . Ψ | 0.00 |
| | late your monthly expenses | | | |
| 22a. A | dd lines 4 through 21. | | \$ | 2,360.00 |
| 22b. C | Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | | \$ | |
| | dd line 22a and 22b. The result is your monthly expenses. | | \$ | 2,360.00 |
| | | | · —— | _,000.00 |
| | late your monthly net income. | 00- | ¢. | 0.400.00 |
| | Copy line 12 (your combined monthly income) from Schedule I. | 23a. | | 2,189.00 |
| 23b. | Copy your monthly expenses from line 22c above. | 23b. | \$ | 2,360.00 |
| | Subtract your monthly expenses from your monthly income. | | • | 474.00 |
| | The result is your monthly net income. | 23c. | \$ | -171.00 |
| For exa | u expect an increase or decrease in your expenses within the year after you ample, do you expect to finish paying for your car loan within the year or do you expect your lation to the terms of your mortgage? | | | ase or decrease because of |
| — | | | | |
| ■ No. | | | | |

| Fill in this | information to identify your | case: | | | |
|---|--|--|-------------------------------|--|------------------------------------|
| Debtor 1 | Alexandra Kelley | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, fili | ing) First Name | Middle Name | Last Name | | |
| United Sta | ates Bankruptcy Court for the: | EASTERN DISTRICT | OF MISSOURI | | |
| Case num | ber <u>17-11034</u> | | | | |
| (if known) | | | | _ | eck if this is an nended filing |
| Declar If two mark You must to obtaining | | , both are equally resp le bankruptcy schedule connection with a bar | onsible for supplying corre | | |
| Did y | you pay or agree to pay some | one who is NOT an atto | orney to help you fill out ba | ankruptcy forms? | |
| - | No | | , ,, | . , | |
| _ | Yes. Name of person | | | Attach Bankruptcy Petition Declaration, and Signatur | |
| | r penalty of perjury, I declare hey are true and correct. | that I have read the su | mmary and schedules filed | with this declaration and | |
| X /s | s/ Alexandra Kelley | | X | | |
| A | Alexandra Kelley signature of Debtor 1 | | Signature of D | Debtor 2 | |
| D | December 7, 2017 | | Date | | |

| Eill | in thi | is info | mation to identify you | r casa: | | | | 1 | |
|----------------------|---|------------------|-----------------------------------|---|----------|------------------------------------|---------------------------------|----------------|---|
| | tor 1 | is illioi | | | | | | | |
| Deb | ioi i | | Alexandra Kelle First Name | Middle Name | | Last Name | | | |
| | tor 2 | iling) | First Name | Middle Name | | Last Name | | | |
| . | | • | | | | | | | |
| Unit | ed St | tates B | ankruptcy Court for the: | EASTERN DISTRICT O | F MIS | SOURI | | | |
| Cas (if kno | e nur | mber | 17-11034 | | | | | _ | heck if this is an mended filing |
| Sta Be a infor | s cor | nen | and accurate as poss | Affairs for Indivi | are fi | ling together, both are | equally respon | sible for supp | 4/1 olying correct r name and case |
| Par | • | _ | , | arital Status and Where Yo | ıı Live | ad Refore | | | |
| | | | | | u =:• | ou Boloro | | | |
| 1. | Wha | t is yo | ur current marital statu | IS? | | | | | |
| | | Marrie Not ma | | | | | | | |
| 2. | During the last 3 years, have you lived anywhere other than where you live now? | | | | | | | | |
| | _ | No Yes. L | ist all of the places you | ived in the last 3 years. Do r | not inc | clude where you live now | <i>I</i> . | | |
| | Deb | otor 1 F | Prior Address: | Dates Debtor 1 lived there | l | Debtor 2 Prior Ac | ldress: | | Dates Debtor 2 lived there |
| | | | | ver live with a spouse or le lifornia, Idaho, Louisiana, No | | | | | |
| | | No | | | | | | | |
| | | Yes. M | lake sure you fill out <i>Sci</i> | hedule H: Your Codebtors (C | Official | l Form 106H). | | | |
| Part | t 2 | Expla | ain the Sources of You | ır Income | | | | | |
| 4. | Fill in | the to | tal amount of income yo | nployment or from operati u received from all jobs and have income that you recei | all bu | sinesses, including part | time activities. | revious calen | dar years? |
| | | No | | | | | | | |
| | | | ill in the details. | | | | | | |
| | | | | Debtor 1 | | | Debtor 2 | | |
| | | | | Sources of income Check all that apply. | (b | eross income pefore deductions and | Sources of in Check all that | | Gross income (before deductions and exclusions) |

| 5. Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployme and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lotte winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. | | | | | | | | | | | | |
|--|------------------------|--|--|---|--|---|---|--|--|--|--|-------------------|
| | List each | source and t | he gross inco | me from ea | ach source separa | ately. Do r | not include income | that | you listed in lir | ne 4. | | |
| | ■ No □ Yes. | Fill in the de | etails. | | | | | | | | | |
| | | | | 51/ 1 | | | | | | | | |
| | | | | Debtor 1 Sources of Describe I | of income below. | each | s income from source e deductions and sions) | 5 | Debtor 2 Sources of inc Describe below | | Gross incom (before deduction and exclusion | ctions |
| Pa | rt 3: Lis | t Certain Pa | yments You | Made Befo | ore You Filed for | Bankrup | tcy | | | | | |
| 6. | ■ Yes. | Neither De individual puring the No. Yes * Subject Debtor 1 co During the No. Yes | 90 days beform Go to line 7 List below expaid that create to adjustment or Debtor 2 or 90 days beform Go to line 7 List below expaid to adjustment or Debtor 2 or 90 days beform Go to line 7 List below expanding payment or Debtor 2 or 100 days beform Go to line 7 List below expanding payment or 100 days beform Go to line 7 List below expanding payment or 100 days beform Go to line 7 List below expanding payment or 100 days beform Go to line 7 List below expanding payment or 100 days beform Go to line 7 | ebtor 2 ha personal, f re you filed ach creditor editor. Do n payments t on 4/01/19 r both hav re you filed ach creditor ach creditor | family, or household for bankruptcy, or to whom you pare to an attorney for and every 3 years and every 3 years for bankruptcy, or to whom you pare to whom you pare for to whom you pare to uptcy case. | did you pay aid a total aid a total ants for do this bankr ars after the umer deb did you pay aid a total obbligations | y any creditor a tot of \$6,425* or more mestic support obl uptcy case. at for cases filed o ots. y any creditor a tot of \$600 or more ar s, such as child sup | e in o ligation or a tal of tal of mod the poort | \$6,425* or mo ne or more pay ons, such as ch after the date of \$600 or more? e total amount t and alimony. | re? ments and the support and | ne total amount ind alimony. Also nd alimony. Also creditor. Do no nclude payment | you o, do t |
| | Creditor | 's Name and | d Address | | Dates of payme | ent | Total amount paid | • | Amount you still owe | Was this p | ayment for | |
| 7. | | | | | | | | | | | | |
| | Insider's | Name and | Address | | Dates of payme | ent | Total amount | A | Amount you | Reason fo | r this payment | |
| 3. | insider? Include pa | ayments on o | | eed or cosi | e y, did you make gned by an inside | | paid nents or transfer | any | still owe | ccount of a c | debt that benef | ited an |
| | Insider's | Name and | Address | | Dates of payme | ent | Total amount paid | 4 | Amount you still owe | | r this payment ditor's name | |
| | | | | | | | puid | | July July | | and o name | |

Case number (if known) 17-11034

Debtor 1 Alexandra Kelley

| Par | t 4: Identify Legal Actions, Repossess | sions, and Foreclosures | | | | | |
|-----|--|------------------------------|--|--------------------------|---------------------------|--|--|
| 9. | Within 1 year before you filed for bankr List all such matters, including personal in modifications, and contract disputes. | | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | |
| | Case title Case number | Nature of the case | Court or agency | Status of th | e case | | |
| 10. | Within 1 year before you filed for bankr Check all that apply and fill in the details b | | perty repossessed, foreclosed | l, garnished, attached | d, seized, or levied? | | |
| | No. Go to line 11.Yes. Fill in the information below. | | | | | | |
| | Creditor Name and Address | Describe the Property | | Date | Value of the property | | |
| 11. | Within 90 days before you filed for bank | | | stitution, set off any a | mounts from your | | |
| | accounts or refuse to make a payment ■ No □ Yes. Fill in the details. | because you owed a debt? | | | | | |
| | Creditor Name and Address | Describe the action th | e creditor took | Date action was taken | Amount | | |
| 12. | Within 1 year before you filed for bankr court-appointed receiver, a custodian, o | | perty in the possession of an a | assignee for the bene | efit of creditors, a | | |
| | ■ No □ Yes | | | | | | |
| Par | t 5: List Certain Gifts and Contributio | ns | | | | | |
| 13. | Within 2 years before you filed for bank ■ No | ruptcy, did you give any gif | ts with a total value of more the | han \$600 per person | ? | | |
| | ☐ Yes. Fill in the details for each gift. Gifts with a total value of more than \$6 per person | Describe the gifts | S | Dates you gave the gifts | Value | | |
| | Person to Whom You Gave the Gift and Address: | d | | | | | |
| 14. | Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No Yes. Fill in the details for each gift or contribution. | | | | | | |
| | Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Co | total Describe what yo | ou contributed | Dates you contributed | Value | | |
| Par | | , | | | | | |
| 15. | Within 1 year before you filed for bankr or gambling? | uptcy or since you filed for | bankruptcy, did you lose anyt | hing because of the | t, fire, other disaster | | |
| | ■ No □ Yes. Fill in the details. | | | | | | |
| | Describe the property you lost and how the loss occurred | | coverage for the loss urance has paid. List pending of Schedule A/B: Property. | Date of your loss | Value of property lost | | |

Case number (if known) 17-11034

Debtor 1 Alexandra Kelley

Debtor 1 Alexandra Kelley Case number (if known) 17-11034

| Pa | t 7: List Certain Payments or Transfers | | | | | | | | |
|-----|---|------------------------------------|---|-----------------------------|------------------------------------|---|--|--|--|
| 16. | Within 1 year before you filed for bankruptcy, consulted about seeking bankruptcy or prepared include any attorneys, bankruptcy petition prepared. | aring a bankruptcy per | tition? | | | erty to anyone you | | | |
| | □ No | | | | | | | | |
| | Yes. Fill in the details. | | | | | | | | |
| | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You | Description and value transferred | alue of any proper | or | ate payment transfer was ade | Amount of payment | | | |
| | Adams Law Group US Bank Building One Mid Rivers Mall Drive, Suite 200 St. Peters, MO 63376 contact@thinkadamslaw.com | Attorney Fees | | 1 | 1/21/17 | \$1,000.00 | | | |
| 17. | Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. | | | | | | | | |
| | ■ No | | | | | | | | |
| | Yes. Fill in the details. | | | ty Da | | | | | |
| | Person Who Was Paid Address | Description and values transferred | Description and value of any property transferred | | | Amount of payment | | | |
| 18. | Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. | | | | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | |
| | Person Who Received Transfer Address | | property transferred pay | | property or eived or debts | Date transfer was made | | | |
| | Person's relationship to you | | | paid in exchai | | | | | |
| 19. | Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No | | | | | | | | |
| | Yes. Fill in the details. | | | | | | | | |
| | Name of trust | Description and v | alue of the propert | y transferred | | Date Transfer was made | | | |
| Pai | t 8: List of Certain Financial Accounts, Inst | ruments, Safe Deposi | t Boxes, and Storag | ge Units | | | | | |
| 20. | Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. | | | | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | |
| | Name of Financial Institution and | Last 4 digits of account number | Type of account of instrument | Date acclosed moved transfe | , or | Last balance before closing or transfer | | | |
| | | | | | | | | | |

Debtor 1 Alexandra Kelley Case number (if known) 17-11034

| 21. | Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? | | | | | | | | | |
|-----|--|---|--------------------------------------|-----------------------|--|--|--|--|--|--|
| | □ No | | | | | | | | | |
| | Yes. Fill in the details. | | | | | | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had access to it? Address (Number, Street, City, State and ZIP Code) | Describe the contents | Do you still have it? | | | | | | |
| | First Midwest Bank PO Box 160 Poplar Bluff, MO 63902 | Self and Spouse | Papers | □ No ■ Yes | | | | | | |
| 22. | Have you stored property in a storage unit or p | place other than your home within 1 | year before you filed for bankruptcy | ? | | | | | | |
| | ■ No | | | | | | | | | |
| | Yes. Fill in the details. | | | | | | | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) | Describe the contents | Do you still have it? | | | | | | |
| Par | 9: Identify Property You Hold or Control for | · | | | | | | | | |
| 23. | Do you hold or control any property that some for someone. | one else owns? Include any propert | y you borrowed from, are storing fo | r, or hold in trust | | | | | | |
| | ■ No | | | | | | | | | |
| | Yes. Fill in the details. | | | | | | | | | |
| | Owner's Name | Where is the property? | Describe the property | Value | | | | | | |
| | Address (Number, Street, City, State and ZIP Code) | (Number, Street, City, State and ZIP Code) | become the property | Value | | | | | | |
| Par | 10: Give Details About Environmental Inform | nation | | | | | | | | |
| For | he purpose of Part 10, the following definitions | s apply: | | | | | | | | |
| _ | | | | | | | | | | |
| | Environmental law means any federal, state, or toxic substances, wastes, or material into the regulations controlling the cleanup of these su | air, land, soil, surface water, ground | | | | | | | | |
| | Site means any location, facility, or property as to own, operate, or utilize it, including disposa | - | aw, whether you now own, operate, | or utilize it or used | | | | | | |
| | Hazardous material means anything an environ hazardous material, pollutant, contaminant, or | | waste, hazardous substance, toxic | substance, | | | | | | |
| Rep | ort all notices, releases, and proceedings that y | ou know about, regardless of when | they occurred. | | | | | | | |
| 24. | Has any governmental unit notified you that yo | ou may be liable or potentially liable | under or in violation of an environm | ental law? | | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice | | | | | | |
| 25. | Have you notified any governmental unit of any release of hazardous material? | | | | | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | | |
| | Name of site | Governmental unit | Environmental law, if you | Date of notice | | | | | | |
| | Address (Number, Street, City, State and ZIP Code) | Address (Number, Street, City, State and ZIP Code) | | 0 | | | | | | |
| | | | | | | | | | | |

Debtor 1 Alexandra Kelley Case number (if known) 17-11034

| 26. | Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. | | | | | | | | |
|---|---|---|---------|--|--------------------|--|--|--|--|
| | ■ No | | | | | | | | |
| | Yes. Fill in the details. | | | | | | | | |
| | Case Title Case Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | | e of the case | Status of the case | | | | |
| Par | t 11: Give Details About Your Business or Co | nnections to Any Business | | | | | | | |
| 27. | Within 4 years before you filed for bankruptcy, | did you own a business or have an | y of th | e following connections to any | business? | | | | |
| | ☐ A sole proprietor or self-employed in a | ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time | | | | | | | |
| | ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) | | | | | | | | |
| | ☐ A partner in a partnership | | | | | | | | |
| | ☐ An officer, director, or managing executive of a corporation | | | | | | | | |
| | ☐ An owner of at least 5% of the voting or equity securities of a corporation | | | | | | | | |
| | No. None of the above applies. Go to Part 12. | | | | | | | | |
| | ☐ Yes. Check all that apply above and fill in the details below for each business. | | | | | | | | |
| | Business Name Di Address | Describe the nature of the business Name of accountant or bookkeeper | | Employer Identification number | | | | | |
| | | | | Do not include Social Security number or ITIN. | | | | | |
| | | | | Dates business existed | | | | | |
| 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financ institutions, creditors, or other parties. | | | | | | | | | |
| | ■ No | | | | | | | | |
| | Yes. Fill in the details below. | | | | | | | | |
| | Name Address (Number, Street, City, State and ZIP Code) | ate Issued | | | | | | | |

| Debtor 1 | Alexandra Kelley | | Case number (if known) | 17-11034 | |
|---------------------------------------|---|--|---------------------------------|---------------------|--|
| Part 12: | Sign Below | | | | |
| I have rea are true a with a ba | nd the answers on this <i>Statement o</i> and correct. I understand that makin | of Financial Affairs and any attachments of Financial Affairs and any attachments of a false statement, concealing property to \$250,000, or imprisonment for the state of the | pperty, or obtaining money or | | |
| /s/ Alex | andra Kelley | | | | |
| | dra Kelley e of Debtor 1 | Signature of Debtor 2 | | | |
| Date | Pecember 7, 2017 | Date | | | |
| Did you a ■ No □ Yes | ttach additional pages to <i>Your Sta</i> | tement of Financial Affairs for Indivi | iduals Filing for Bankruptcy ((| Official Form 107)? | |
| Did you p ■ No | ay or agree to pay someone who is | s not an attorney to help you fill out | bankruptcy forms? | | |

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

| Fill in this information to identify your case: | | | | | | | |
|---|--|--|--|--|--|--|--|
| Debtor 1 | Alexandra Kelley | | | | | | |
| Debtor 2 (Spouse, if filing) | | | | | | | |
| United States B | Bankruptcy Court for the: Eastern District of Missouri | | | | | | |
| Case number (if known) | 17-11034 | | | | | | |

| Check as directed in lines 17 and 21: | | | | | | | |
|---------------------------------------|--|--|--|--|--|--|--|
| | According to the calculations required by this Statement: | | | | | | |
| | 1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3). | | | | | | |
| | 2. Disposable income is determined under 11 U.S.C. § 1325(b)(3). | | | | | | |
| | 3. The commitment period is 3 years. | | | | | | |
| | 4. The commitment period is 5 years. | | | | | | |

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income

- 1. What is your marital and filing status? Check one only.
 - □ Not married. Fill out Column A, lines 2-11.
 - Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

| | | | | Column Debtor 1 | | nn B or 2 or iling spouse |
|--|-------------|-----------------------|-----------------------------|-----------------|------|-------------------------------------|
| Your gross wages, salary, tips, bonuses, overtim payroll deductions). | e, and c | ommissio | ons (before all | \$ | 0.00 | \$ 1,552.17 |
| Alimony and maintenance payments. Do not inclu Column B is filled in. | de paym | ents from | a spouse if | \$ | 0.00 | \$ 0.00 |
| All amounts from any source which are regularly of you or your dependents, including child support from an unmarried partner, members of your househ and roommates. Do not include payments from a sport you listed on line 3. | ort. Includ | de regulai depende | contributions nts, parents, | \$ | 0.00 | \$ 0.00 |
| 5. Net income from operating a business, profession, or farm | Debto | r 1 | | | | |
| Gross receipts (before all deductions) | \$_ | 0.00 | | | | |
| Ordinary and necessary operating expenses | -\$ | 0.00 | | | | |
| Net monthly income from a business, profession, or to | farm \$_ | 0.00 | Copy here -> | \$ | 0.00 | \$ 0.00 |
| 6. Net income from rental and other real property | Debto | r 1 | | | | |
| Gross receipts (before all deductions) | \$_ | 0.00 | | | | |
| Ordinary and necessary operating expenses | -\$ | 0.00 | | | | |
| Net monthly income from rental or other real property | , \$ | 0.00 | Copy here -> | \$ | 0.00 | \$ 0.00 |

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

15b. The result is your current monthly income for the year for this part of the form.

Multiply line 15a by 12 (the number of months in a year).

x 12

18,626.04

| Debt | or 1 | Alex | andra Kelley | | Case number (if known) | 17-11034 |
|------|---------------|-----------|---|--------------------------|------------------------------------|--------------------------------------|
| 16 | . Cal | culate t | the median family income that applies to y | ou. Follow these step | s: | |
| | 16a | . Fill in | the state in which you live. | МО | | |
| | 16b | . Fill in | the number of people in your household. | 3 | | |
| | 16c | . Fill in | the median family income for your state and | size of household. | | _{\$} 68,627.00 |
| 17 | Hov | instru | d a list of applicable median income amounts ctions for this form. This list may also be avai te lines compare? | | | <u> </u> |
| 17 | . 1.01 17a | _ | Line 15b is less than or equal to line 16c. C | on the top of page 1 of | this form, check box 1. Dispos | sable income is not determined under |
| | | | 11 U.S.C. § 1325(b)(3). Go to Part 3. Do N | | | |
| | 17b | . 🗆 | Line 15b is more than line 16c. On the top (1325(b)(3). Go to Part 3 and fill out Calcu your current monthly income from line 14 a | lation of Your Dispo | | |
| Par | t 3: | Cald | culate Your Commitment Period Under 11 | U.S.C. § 1325(b)(4) | | |
| 18. | Cop | y your | total average monthly income from line 1 | 1. | | \$\$ |
| 19. | con | tend tha | e marital adjustment if it applies. If you are at calculating the commitment period under 1 acome, copy the amount from line 13. | | | our |
| | 19a | . If the | marital adjustment does not apply, fill in 0 on | line 19a. | | - \$ |
| | | | | | | |
| | 19b | . Subtr | act line 19a from line 18. | | | \$1,552.17 |
| 20. | Cal | culate | your current monthly income for the year. | Follow these steps: | | |
| | 20a | . Сору | line 19b | | | \$1,552.17 |
| | | Multip | bly by 12 (the number of months in a year). | | | x 12 |
| | | | | | | |
| | 20b | . The re | esult is your current monthly income for the ye | ear for this part of the | form | \$ <u>18,626.04</u> |
| | | | | | | |
| | | • | | | " 40 | e 69 627 00 |
| | 20c | . Сору | the median family income for your state and | size of nousehold from | 1 line 16C | \$ 68,627.00 |
| | 21. | How | do the lines compare? | | | |
| | | | Line 20b is less than line 20c. Unless otherwis | se ordered by the cour | rt, on the top of page 1 of this f | form, check box 3, The commitment |
| | | | Line 20b is more than or equal to line 20c. Un commitment period is 5 years. Go to Part 4. | less otherwise ordered | d by the court, on the top of pa | age 1 of this form, check box 4, The |
| Par | t 4: | Sigi | n Below | | | |
| | By s | signing | here, under penalty of perjury I declare that t | ne information on this | statement and in any attachme | ents is true and correct. |
|) | (/s, | / Alexa | andra Kelley | | | |
| | | | Ira Kelley of Debtor 1 | | | |
| | • | | cember 7, 2017 | | | |
| | | MM . | /DD /YYYY | | | |
| | - | | sked 17a, do NOT fill out or file Form 122C-2. | | | |
| | If yo | ou chec | ked 17b, fill out Form 122C-2 and file it with t | nis form. On line 39 of | that form, copy your current n | monthly income from line 14 above. |

| Debtor 1 | Alexandra Kelley | Case number (if known) | 17-11034 |
|----------|------------------|------------------------|----------|
| | | | |

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 05/01/2017 to 10/31/2017.

Current Monthly Income Details for the Debtor's Spouse

Spouse Income Details:

Income for the Period 05/01/2017 to 10/31/2017.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Care for Family Member

Year-to-Date Income:

Starting Year-to-Date Income: \$0.00 from check dated 4/30/2017.

Ending Year-to-Date Income: \$6,715.00 from check dated 10/31/2017.

Income for six-month period (Ending-Starting): **\$6,715.00**.

Average Monthly Income: \$1,119.17.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Food Stamps

Income by Month:

| 6 Months Ago: | 05/2017 | \$433.00 |
|---------------|--------------------|----------|
| 5 Months Ago: | 06/2017 | \$433.00 |
| 4 Months Ago: | 07/2017 | \$433.00 |
| 3 Months Ago: | 08/2017 | \$433.00 |
| 2 Months Ago: | 09/2017 | \$433.00 |
| Last Month: | 10/2017 | \$433.00 |
| | Average per month: | \$433.00 |

Non-CMI - Social Security Act Income

Source of Income: SS

Income by Month:

| 6 Months Ago: | 05/2017 | \$676.00 |
|---------------|--------------------|-----------------|
| 5 Months Ago: | 06/2017 | \$676.00 |
| 4 Months Ago: | 07/2017 | \$676.00 |
| 3 Months Ago: | 08/2017 | \$676.00 |
| 2 Months Ago: | 09/2017 | \$676.00 |
| Last Month: | 10/2017 | \$676.00 |
| | Average per month: | \$676.00 |
| | | |